

INSPECTION, TESTING, AND CERTIFICATION OF WORK
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: WV-002 Date of Visit: 3-13-18

Contractor Personnel on Site:

4. <u>Casto</u>	4. _____
5. _____	5. _____
6. _____	6. _____

Work Performed:

Inspection, Testing, and Certification

5. <u>3 Backflow Preventer tests</u>
6. _____
7. _____
8. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: James Stacher Date: 3-13-18
Signed: James Stacher

To be signed by Facility Manager:

I certify that the above named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed:

Print Name/Rank: [Signature] Date: _____

Signed: _____

E-Mail: _____